OUI HARDSHIP CRITERIA

NOTE: These requirements are subject to change at the RMV's discretion. Application for hardship will be subject to the requirements in place on the date of application.

reasonable discretion of the RMV, based on the facts of the case.				
	There is NO evidence of any operation since the effective date of this revocation.			
	The MINIMUM amount of time has been served for hardship consideration.			

DWI ELIGIBILITY TIME						
Length of suspension	Work\education hardship	General hardship				
1 yr (365 days)	3 months into DWI revocation	6 months into DWI revocation				
2 yrs (730 days)	1 yr into DWI revocation	18 months into DWI revocation				
8 yrs (2920 days)	2 yrs into DWI revocation	4 yrs into DWI revocation				
10 yrs (3650)	5 yrs into DWI revocation	8 yrs into the DWI revocation				

 All other active revocation periods have been COMPLETED.
 The applicant must provide documented proof of completion of the <u>proper</u> alcohol treatment program. 2 week in-house program for 2 nd offense, 90 day in-house program for 3 rd and 4 th offenses.
 The applicant must provide the Discharge Summary from the treatment program, stating the risk factor or recidivism rate.
 The applicant must provide proof of compliance with all ordered after-care. A Discharge Summary (if aftercare is complete) or a Progress Review (if aftercare is ongoing) from the aftercare provider stating the risk factor or recidivism rate.
 The applicant has provided a letter from probation, not more than 30 days old stating that the applicant is in compliance with probation.
 The applicant has documented a legitimate hardship. Applicant must provide a letter from his/her employer on letterhead, which cannot be more than 30 days old. The letter must state the applicant's need for a hardship license and the work hours.

Applicants applying for a hardship license for other purpose (i.e. education, medical treatments), require third party documentation of the hardship.

the hours requested.

A self employed applicant must present proof of self-employment. Acceptable forms of proof consist of a business certificate, tax forms indicating self-employment, and/or a current professional license. The applicant must also present a letter on his/her own behalf explaining his/her need for a hardship license and

The applicant is responsible for provided proof may be included within the emproutes, MapQuest etc.							
Ignition Interlock packet given once ap	pproved for a hardship.						
NOTE: Reinstatement is only allowed once the proof of installation of interlock and affidavits have been returned to a hearings officer.							
	For RMV use only						
Twelve (12) hours are allowed for a hadocumentation presented by the custon	ardship license. Hardship hou mer at the time of the hearing.	rs must be consistent	with				
The applicant's Board of Probation red	cord & folder were checked a	nd the driving record	was updated.				
BOP Check Date:	P Check Date: Folder Pulled Date:						
The Director of Driver Control must approabove documentation and complete the statem. Statement of reasons supporting hardship issue.	nent of reasons below. Forwa	rd all documentation	to Boston.				
Signature:	SU#:	Date:					
Reviewer:	SU#:	Date:					
Approved	Denied						
Comments:							